Time: Monday, June 6, 2016 - 12:30pm EST. Location: Yoho Board Room, 3<sup>rd</sup> floor, ISDH

Called by: Katie Hokanson, Primary Investigator (PI), PHHSBG

**ATTENDEES:** Katie Hokanson - *State Health Commissioner Designee* (ISDH), Ann Alley (ISDH), Art Logsdon (ISDH), Lindsey Bouza (ISDH), Gretchen Martin (ISDH), Laura Chavez (ISDH), Linda Stemnock (ISDH), Mohan Ambaty (ISDH), Midia Fulano (ISDH), Mike Mettler (ISDH, via telephone), Pan Pontones (ISDH), Sarah Seward (ISDH), Helen Schwartzel (ISDH)

#### **TOPICS**

- 1. Plans for Fiscal Year 2016 Programs—This meeting is being held to review the Block Grant to be submitted. Upon approval, a public hearing is scheduled for June 9, 2016.
  - a. Chronic Disease Ann Alley
    - i. HO HDS-1 Cardiovascular Health (\$525,126).
      - 1. Chronic Disease Coalitions—support is provided directly and indirectly to the many chronic health disease coalitions through the state.
      - Advanced Workforce Development Community Paramedicine—funding provided to a hospital-based and a municipal-based teams to provide in-home care to persons unable to access care.
  - b. Food Protection Mohan Ambaty
    - i. HO FS-6 Safe Food Preparation Practices in Food Service and Retail Establishments (121,445).
      - CodePal maintenance and migration to a new system—A new vendor
         (Computer Aide, Inc.) has been chosen to migrate current data from CodePal.
         An RFP process was used with 4 applicants. The conversion to the new system is expected to begin July 1, 2016.
  - c. Child Fatality Review (CFR) Gretchen Martin
    - i. HO IVP-4: Child Fatality Review of Child Deaths due to External Causes (\$68,469)
      - Improve pediatric injury prevention programs & resources at the local level—
         91 of 92 counties now have a Child Fatality Review Team. Work will continue with providing assistance and resources.
      - 2. Train local child fatality review teams to improve the number and quality of cases reported entered. Work will continue to provide technical assistance to these teams regarding data collection, what is important and not important, and

uniformity in reporting.

- d. Injury Prevention Katie Hokanson
  - i. HO IVP-11: Unintentional Injury Deaths (\$182,815)
    - Injury prevention primary programming—focusing on child passenger safety and adult falls.
    - 2. Injury prevention resource guide—focusing on data reports and new injury prevention grant opportunities to expand infrastructure.
- e. Nutrition and Physical Activity Eden Bezy (Lindsey Bouza)
  - HO NWS-2 Nutritious Foods and Beverages Offered Outside of School Meals(\$32,876).
    - 1. Childhood obesity primary prevention programming—A contractor will be hired to develop healthy eating guidelines for school age children
  - ii. HO PA-3 Adolescent Aerobic Physical Activity and Muscle-Strengthening Activity (\$32,876).
    - Increase access to places to be physically active in Indiana—Contractor also
      will work with multiple partners to research additional activities, etc that can be
      provided to children.
- f. Women's Health Laura Chavez
  - i. HO MICH-1 Fetal and Infant Deaths (\$13,500).
    - ISDH Labor of Love Annual Infant Mortality Summit—Funding will assist in the Labor of Love Summit which was attended by over 700 individuals in 2015. Also assist in funding the Breastfeeding Conference which was attended by 100 individuals with more wanting to attend in 2015.
- g. Epidemiology Resource Center (ERC) / Data Analysis Team (DAT) Pam Pontones / Linda Stemnock
  - i. HO PHI-13 Epidemiology Services (\$109,184)
    - Essential functions of Chronic Disease Epidemiology in State Health
      Departments—Claudine Samanic has joined ISDH as a direct assistance
      employee from CDC. She will provide additional epidemiological support to
      various program areas throughout the agency. Her main focus is on chronic
      diseases.
    - 2. Increase analytical capacity of state epidemiologists and data analysts—Matt

Kaag will continue with providing assistance to various staff at ISDH. Datasets are going to be provided quarterly instead of yearly to enable staff to have access to data more quickly.

- Increase the number of surveys completed in the 2017 Indiana Behavioral Risk Factor Surveillance Survey (BRFSS) survey—funding enables additional BRFSS surveys to be conducted.
- Support production of annual reports and datasets.—Updating SAS code for mortality datasets.
- h. Public Health & Performance Management –Dr. Jennifer Walthall/Sarah Seward
  - i. HO PHI-2: Continuing Education of Public Health Personnel (\$195,116
  - ii. Provide access to educational resources and trainings—Leadership at All Levels is back after taking a break. The program began in 2008 through 2013. A group of 50 individuals from ISDH and other state agencies will be graduating this summer.
  - iii. HO PHI-15: Health Improvement Plans (\$334,995.
    - 1. Data warehouse maintenance—To be expanded.
  - iv. HO PHI-16: Public Health Agency Quality Improvement (QI) (\$214,851).
    - 1. LEAN Training—to be revived beginning July 1, 2016.
    - 2. Performance Management System—work on dashboards.
- i. Sexual Assault Services (ICJI) Sharon Langlotz
  - i. HO IPV-40: Reduce Sexual Violence (Rape Prevention) (\$144,972).
    - Extend coordinated, audience-appropriate sexual violence prevention outreach
      and education programs—Currently funds 17 entities that provide education
      and outreach to communities as well as direct services to victims of sexual
      abuse.
    - 2. Improve and enhance service and response initiatives to victims of sexual violence—educate counselors.
- j. TB/Refugee Midia Fulano
  - i. HO IID-31: Treatment for Latent TB (\$121,412).
    - 1. Enhancement of computer application for contact investigations—Focus on enhancement of the SWIMMS system.
    - 2. Enhancement of the computer application system TB forms Latent TB form (LTBI).
- k. Environmental Public Health Division Mike Mettler

- i. HO OH-13 Community Water Fluoridation (\$204,997).
  - 1. Maintain water systems with optimal fluoride levels—Funding for staff (3) to provide community education and monitoring of water systems with fluoride treatment. Great track record!!!

ALL FUNDING REQUESTS HAVE BEEN APPROVED BY THE ADVISORY COMMITTEE AS SUBMITTED.

- 2. Other Discussion/Questions/Comments—Katie attended the PHHSBG Grantee Meeting in Atlanta recently. Topics discussed were:
  - a. Success Stories are critical for telling the story of the value of the block grant. Various organizations contact CDC for information about the use of the block grant. These stories will help educate the public about what we do. Next Step: Katie will send FY 15 work plan program areas the success story guidance in September. Stores will be due in October.
  - b. Deliverable Timeline: Katie will put together a timeline of which documents are due and when they are due. She will then send a meeting notice 15 business days before the due date so that program areas receive reminders about upcoming deadlines. Please Note: this is subject to change based on CDC deliverable requirements.
  - c. Federal Law Requires Advisory Committee Meetings—must meet at least 2 times in a federal fiscal year (10/1-9/30). Indiana needs to expand committee to include additional groups.
     Katie asked that each person think about additional people and let her know.
  - d. Evaluation of the Block Grant—is coming. CDC is measuring the value of the flexibility.
  - e. Compliance Review—We will receive a compliance review document ahead of time and meetings will be scheduled with program areas and finance to prepare. Each program area will prepare a report highlighting accomplishments.
  - f. Annual Reports are also used by Congress and for data requests.

V. Next Meeting: August 2016